

CDR EXHIBIT LIST

CASE NAME _____ DR# _____

DATE SUBMITTED _____ E# _____

EXHIBITS SUBMITTED BY: _____

RECEIVED BY: _____ DATE RECEIVED _____

ATTORNEY FOR PLAINTIFF _____

ATTORNEY FOR DEFENDANT _____

<u>Exhibit ID.</u>	<u>LIST OF EXHIBITS and DESCRIPTION</u>	<u>Admitted</u>
<input type="checkbox"/>	_____	<input type="checkbox"/>
<input type="checkbox"/>	_____	<input type="checkbox"/>
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RECEIVED BY FILE ROOM STAFF _____ DATE _____